

**EFFECT OF LIFE SKILLS BASED HEALTH EDUCATION
ON ADOLESCENT STUDENTS' AWARENESS OF AND
ATTITUDE TOWARDS SUBSTANCE USE**

by

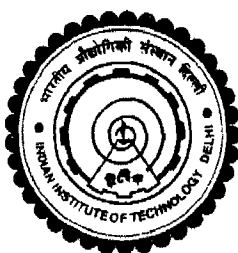
DIVYA S. PRASAD

Department of Humanities and Social Sciences

Submitted

in fulfillment of the requirements of the degree of Doctor of Philosophy

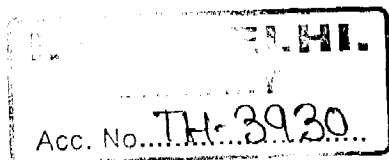
to the



Indian Institute of Technology, Delhi

August 2009

TH
373.5-053.6:61
PRA-E

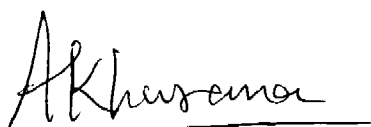


CERTIFICATE

This is to certify that the thesis titled “Effect of Life Skills based Health Education on Adolescent Students’ Awareness of and Attitude towards Substance Use” being submitted by Ms. Divya S. Prasad to the Indian Institute of Technology, Delhi for the award of the degree of Doctor of Philosophy, is a record of bonafide research work carried out by her.

Divya S. Prasad has worked under our guidance and supervision and has fulfilled the requirements for the submission of this thesis, which to our knowledge has reached the requisite standard.

The results contained in this thesis have not been submitted in part or in full, to any other University or Institute for the award of any degree or diploma.



Dr. Amulya Khurana
Professor of Psychology
Department of Humanities &
Social Sciences
Indian Institute of Technology, Delhi
Hauz Khas
New Delhi-110016



Dr. Jitendra Nagpal
Consultant Psychiatrist,
Vidya Sagar Institute of Mental
Health & Neurosciences
Nehru Nagar
New Delhi-110065

Date: 28th August 2009

Place: New Delhi

ACKNOWLEDGEMENTS

At the outset, I would like to extend my sincerest gratitude to my learned guide, Prof. Amulya Khurana, who constantly and tirelessly kept on encouraging me for this endeavour. Despite the volume of her work and commitments, she has always been available to direct, clarify, support and give meaningful shape to this research effort. I am forever indebted to her for being able to empathize and accommodate me. In my interactions with her, several personal and professional learnings have evolved and the journey has been truly “priceless”.

I am fortunate to have the guidance of Dr. Jitendra Nagpal, who kept on reiterating that clinical experience should be backed with research and has encouraged me to apply my thoughts in this direction. I am deeply appreciative of his dedication and commitment to outreach works and this has been a constant source of inspiration, as well as, motivation for me.

I am thankful to the school Principals and the students, who showed keen interest, devoted their time and energies, for the initiative of this kind.

A few words for Harprit and Apar, who were true friends and helped me with the statistical analysis and provided support at vital times. Special thanks to Bilal, for providing speedy secretarial help.

Words fail me to express my feelings for my parents, brother, and in-laws who took my unexplained moodiness due to my preoccupation with this work, in an extremely positive manner. Their timely contribution and patience is truly cherished.

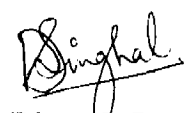
Finally, heart felt thanks to my husband, for being able to differentiate between my need to simply ventilate and desperation for his help and suggestions.

Last but not the least; I thank my daughter for acting as a stress buster and keeping me charged up with her constant queries and interest in my work. She can take her full table back, part of which I was using as additional space for my work.

Above all, I thank God for his divine intervention.

28th August 2009

New Delhi



Divya S. Prasad

ABSTRACT

Many adolescents experiment with various substances (alcohol, tobacco and other drugs) which can cause serious health, personal and social problems. The aim of the present study was to find out the effect of Life Skills based Health Education (LSBHE) on adolescent students' awareness of, and attitude towards substance use. Based on the review of literature eight hypotheses were formulated and tested.

A purposive sample of 583 school going adolescent students was selected and data on four tools were collected using pretest-posttest control group design. A module for LSBHE was designed for intervention. Both descriptive and inferential statistics were employed for data analysis.

Results showed that girls differed significantly from boys and they had more accurate knowledge about various substances as compared to boys. The difference in the awareness level of government and private school students, as well as substance users and non-users, was not significant.

Girls had significantly more unfavourable attitude towards substance use as compared to boys. Private school students did not differ significantly from the students of government schools in their attitude towards substance use. Substance users had a significantly more favourable attitude towards substance use than non-users. There was a significant negative correlation between awareness of substances and attitude towards substance use.

After LSBHE intervention, there was a significant improvement in the awareness of various substances across gender, type of school and substance use status.

Overall, there was no significant effect on attitude towards substance use, post intervention. Change in attitude was significant only for one subscale; 'Social sanction for substance use'. Students reported improvement in life skills after LSBHE intervention.

The results have been discussed in the light of other relevant studies and conclusions were drawn accordingly. Limitations of the study have been pointed out and suggestions for future research have been made.

TABLE OF CONTENTS

CONTENTS	Page No.
CHAPTER I: INTRODUCTION	1-14
1.1 The Indian Scenario	3
1.2 School based Health Education	7
1.3 Evolution of the Present Study	9
1.4 Objectives of the Study	10
1.5 Scope of the Study	11
1.6 Significance of the Study	12
1.7 Overview of the Thesis	13
 CHAPTER II: THEORETICAL ORIENTATION AND BACKGROUND	 15-79
2.1 Health Education	15
2.1.1 Models in health education	19
2.2 Life skills and Theoretical Background	21
2.2.1 Evaluating skills based health education	30
2.3 Attitude and Attitudinal Change	33
2.3.1 Definition of attitude	33
2.3.2 Attitude object	34
2.3.3 Theories of attitude formation and attitude change	36
2.3.4 Factors in attitude change	43
2.3.5 Theories of resistance to attitude change	46
2.3.6 Attitude and behavior	47
2.4 Understanding Adolescent Development	51

2.4.1	Other approaches	52
2.4.2	Changes during adolescence	56
2.4.3	Theories of adolescent development	57
2.5	Understanding Substance Use in Adolescence	61
2.5.1	Substance use, abuse and dependence	61
2.5.2	Theories of substance use causation	63
2.5.3	Models of substance use	65
2.5.4	Common substances of abuse	70
2.6	Conceptual Scheme Guiding the Study	78
 CHAPTER III: REVIEW OF LITERATURE AND DEVELOPMENT OF HYPOTHESES		 80-139
3.1	Prevalence of Substance Use	82
3.1.1	The Indian context	88
3.2	Attitude towards Substance Use	93
3.2.1	The Indian context	94
3.3	Psychosocial Factors Associated with Substance Use	98
3.3.1	The Indian context	105
3.4	Prevention Programmes in Substance Use	108
3.4.1	The Indian context	124
3.5	Life Skills Intervention and Substance Use	127
3.6	Development of Hypotheses	136
3.6.1	Rationale for hypotheses	136

CHAPTER IV: DEVELOPMENT OF TOOLS	140-160
4.1 Attitude towards Substance Use Scale (ATSUS)	140
4.1.1 Development of the scale	141
4.1.2 Test check of the instrument	144
4.1.3 Reliability of the instrument	144
4.1.4 Naming of the factors	147
4.1.5 Ascertaining internal consistency of factors/sub-scales	148
4.2 Module for Life Skills based Health Education	151
4.2.1 Methods used in the module	152
4.2.2 Objectives of the module for life skills based health education	155
4.2.3 Description of the module	155
4.2.4 Guidelines followed during implementation of the module	157
4.3 Development of Other Tools	158
4.3.1 Awareness of Substances Questionnaire (ASQ)	159
4.3.2 Background Information Schedule	159
4.3.3 Life Skills Questionnaire	159
CHAPTER V: METHOD OF STUDY	161-191
5.1 Research Design	161
5.2 Sample and Sampling procedure	166
5.2.1 Description and size of the sample	166
5.2.2 The Sample	168
5.2.3 Comparison between experimental and control group on demographic variables	169

5.3	Variables	183
5.3.1	Independent variables	183
5.3.2	Dependent variables	183
5.4	Tools	184
5.5	Procedure	185
5.5.1	Interaction with school Principals	186
5.5.2	Pretest data collection (Session 1)	186
5.5.3	Posttest data collection (Session 5)	188
5.6	Statistical Analysis	191
CHAPTER VI: RESULTS AND DISCUSSION		192-255
6.1	Awareness of Substances	193
6.2	Prevailing Attitudinal Patterns in Adolescent Students towards Substance Use	196
6.3	Effect of Intervention: Comparison of pre and posttest data on awareness of substances	201
6.4	Effect of Intervention: Comparison of pre and posttest data on attitude towards substance use	204
6.5	Effect of Intervention: Comparison of experimental and control group	214
6.6	Effect of Intervention on Skills	216
6.6.1	Effect of intervention on decision making skills	216
6.6.2	Effect of intervention on resistance skills	219
6.6.3	Effect of intervention on refusal self-efficacy	219
6.6.4	Effect of intervention on behavioural intention to use substances	224
6.7	Analysis of Data from Background Information Schedule	225

6.7.1	Availability of substances	226
6.7.2	Comparative analysis between users and non-users on various influencing factors on substance use	227
CHAPTER VII: SUMMARY AND IMPLICATIONS OF THE STUDY		256-259
7.1	Summary of findings	256
7.2	Implications of the study	258
CHAPTER VIII: LIMITATIONS OF THE STUDY AND SUGGESTIONS FOR FUTURE RESEARCH		260-268
8.1	Limitations of the Study	260
8.2	Suggestions for Future Research	264
REFERENCES		269-294
APPENDICES		
ABOUT THE AUTHOR		